

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?: NONE
Title:: 4-QUINOLINOL DERIVATIVES AND
FUNGICIDES CONTAINING THE SAME
AS AN ACTIVE INGREDIENT USED
FOR AGRICULTURE AND
HORTICULTURE
Attorney Docket Number:: 233763US0CONT

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Yokohama-shi
Status:: FULL CAPACITY
Given Name:: Kazumi
Family Name:: YAMAMOTO
City of Residence:: Yokohama-shi
State or Province of Residence:: Kanagawa
Country of Residence:: JAPAN
Street of Mailing Address:: c/o MEIJI SEIKA KAISHA, LTD.
PHARMACEUTICAL RESEARCH
CENTER
760, Morooka-cho
Kohoku-ku
City of Mailing Address:: Yokohama-shi
State or Province of Mailing Address:: Kanagawa
Country of Mailing Address:: JAPAN
Postal or Zip Code of Mailing Address:: 222-0002

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Yokohama-shi
Status::	FULL CAPACITY
Given Name::	Takeshi
Family Name::	TERAOKA
City of Residence::	Yokohama-shi
State or Province of Residence::	Kanagawa
Country of Residence::	JAPAN
Street of Mailing Address::	c/o MEIJI SEIKA KAISHA, LTD. PHARMACEUTICAL RESEARCH CENTER 760, Morooka-cho Kohoku-ku
City of Mailing Address::	Yokohama-shi
State or Province of Mailing Address::	Kanagawa
Country of Mailing Address::	JAPAN
Postal or Zip Code of Mailing Address::	222-0002
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Yokohama-shi
Status::	FULL CAPACITY
Given Name::	Michiaki
Family Name::	IWATA
City of Residence::	Yokohama-shi
State or Province of Residence::	Kanagawa
Country of Residence::	JAPAN
Street of Mailing Address::	c/o MEIJI SEIKA KAISHA, LTD. PHARMACEUTICAL RESEARCH CENTER 760, Morooka-cho Kohoku-ku
City of Mailing Address::	Yokohama-shi
State or Province of Mailing Address::	Kanagawa
Country of Mailing Address::	JAPAN
Postal or Zip Code of Mailing Address::	222-0002

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Yokohama-shi
Status::	FULL CAPACITY
Given Name::	Keiichi
Family Name::	IMAMURA
City of Residence::	Yokohama-shi
State or Province of Residence::	Kanagawa
Country of Residence::	JAPAN
Street of Mailing Address::	c/o MEIJI SEIKA KAISHA, LTD. PHARMACEUTICAL RESEARCH CENTER 760, Morooka-cho Kohoku-ku Yokohama-shi
City of Mailing Address::	Yokohama-shi
State or Province of Mailing Address::	Kanagawa
Country of Mailing Address::	JAPAN
Postal or Zip Code of Mailing Address::	222-0002
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Yokohama-shi
Status::	FULL CAPACITY
Given Name::	Hiroshi
Family Name::	KURIHARA
City of Residence::	Yokohama-shi
State or Province of Residence::	Kanagawa
Country of Residence::	JAPAN
Street of Mailing Address::	c/o MEIJI SEIKA KAISHA, LTD. PHARMACEUTICAL RESEARCH CENTER 760, Morooka-cho Kohoku-ku Yokohama-shi
City of Mailing Address::	Yokohama-shi
State or Province of Mailing Address::	Kanagawa
Country of Mailing Address::	JAPAN
Postal or Zip Code of Mailing Address::	222-0002

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Inashiki-gun
Status:: FULL CAPACITY
Given Name:: Norio
Family Name:: SASAKI
State or Province of Residence:: Ibaraki
Country of Residence:: JAPAN
Street of Mailing Address:: 33-go
6-ban
Chuo 4-chome
City of Mailing Address:: Inashiki-gun
State or Province of Mailing Address:: Ibaraki
Country of Mailing Address:: JAPAN

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Ryugasaki-shi
Status:: FULL CAPACITY
Given Name:: Yoshihiro
Family Name:: USUI
City of Residence:: Ryugasaki-shi
State or Province of Residence:: Ibaraki
Country of Residence:: JAPAN
Street of Mailing Address:: 6, 14-banchi
Nagayama 6-chome
City of Mailing Address:: Ryugasaki-shi
State or Province of Mailing Address:: Ibaraki
Country of Mailing Address:: JAPAN

Applicant Authority Type:: INVENTOR
 Primary Citizenship Country:: Chiba-shi
 Status:: FULL CAPACITY
 Given Name:: Nobumitsu
 Family Name:: SAWAI
 City of Residence:: Chiba-shi
 State or Province of Residence:: Chiba
 Country of Residence:: JAPAN
 Street of Mailing Address:: B-201, 14, 12-banchi
 Asumigaoka 5-chome
 Midori-ku
 City of Mailing Address:: Chiba-shi
 State or Province of Mailing Address:: Chiba
 Country of Mailing Address:: JAPAN

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/424,257	03/21/00
This Application	National Stage of	PCT/JP98/02434	06/02/98

FOREIGN PRIORITY INFORMATION

Application Number::	Country::	Filing Date::	Priority Claimed::
144266/97	Japan	06/02/97	YES

ASSIGNMENT INFORMATION

Assignee Name:: MEIJI SEIKA KAISHA, LTD.
 Street of Mailing Address:: 4-16, Kyobashi 2-chome,
 Chuo-ku
 City of Mailing Address:: Tokyo
 Country of Mailing Address:: JAPAN
 Postal or Zip Code of Mailing Address:: 104-8002